

ISSUE SLIP STAPLE HERE (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	ED	08972	11/24/11
O.I.P.E. CLASSIFIER		17	
FORMALITY REVIEW		08904	8-18-98

### INDEX OF CLAIMS

*[Handwritten signature]*

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

BEST AVAILABLE COPY

Claim	Final	Original	Date
1			10/1/02
2			11/1/02
3			10/5/02
4			10/18/02
5			11/13/02
6			11/13/02
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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